Filing Date

TRANSMITTAL

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 10/749,131 **Application Number**

12/30/2003

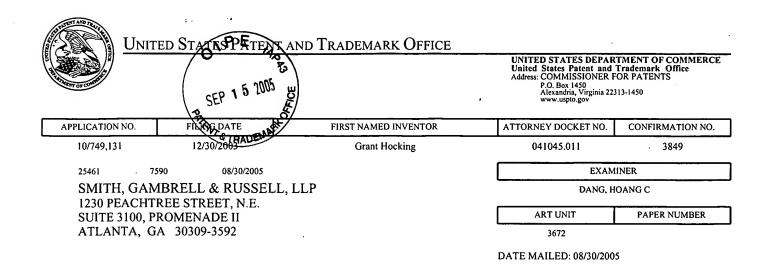
FORM FORM	First Named Invent	HOCKING, Grant .							
	Art Unit		3672						
to be used for all correspondence after i	Examiner Name		DANG, Hoa						
Number of Pages in This Submissi	Attorney Docket Nu	ımber	041045.011		ノ				
ENCLOSURES (check all that apply)									
Fee Transmittal Form				After Allowance Communication to TC					
	Licensing	-related Papers		Appeal Communication to Board of Appeals and Interferences					
	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)						
After Final		Convert to a al Application		Proprietary Information					
Affidavits/declaration(s)		Attorney, Revocation of Correspondence Add	ress	Status Letter					
Extension of Time Request	Terminal	Disclaimer		Other Enclosure(s) (please identify below):					
Express Abandonment Request	I <u> </u>	for Refund ber of CD(s)		Informality re: Payment of Fee Patent App. Fee Determination Record Return Receipt Postcard					
☐ Information Disclosure Statement	☐ Lar	ndscape Table on CD					4		
Certified Copy of Priority Document(s)	Remarks								
Reply to Missing Parts/ Incomplete Application									
Reply to Missing Parts under 37 CFR1.52 or 1.53									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm	Smith, Gambre	II & Russell, LLP							
Signature	60								
Printed Name	Brendan E. Sq	uire					_		
Date	2, 2005 Reg. No. 48,749					\rfloor			
	CERTIFICATE OF TRANSMISSION/MAILING								
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.									
Signature Lucy Himsely									
Typed or printed name Lucy Kin		$\overline{}$		Date	September _	3, 2005			

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

I F		on 12/08/		05 (H.R. 4818).			(Complet	te if Known		
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number		10/749,131					
L,	FEE TRANSMITTAL			Filing Da	te	12/30/2003					
4,	for F				First Nar	ned Inventor	HOCKIN	G, Gran	t		
n X	Applicant claims small e	entity sta	atus. See 37	CFR 1.27	Examine	r Name	DANG, F	loang C.			
1000) L				Art Unit		3672				
	TENAL AMOUNT OF PAYN	/ENT	(\$) 150		Attorney	Docket No.	041045.0	011			
M	ETHOD OF PAYMENT	(check	all that apply	<i>'</i>)							
Σ	☐ Check ☐ Credit Card	M₁	oney Order [None	Other (p	lease identif	y) :				
ΙÞ	Deposit Account Depos	sit Accou	int Number: 0	2-4300		Deposit Acc	ount Nam	e: Smi	th, Gambre	ell & Rus	ssell, LLP
	For the above-ident	tified de	posit account,	the Director is	hereby a	uthorized to:	(check a	II that a	pply)		
ı	Charge fee(s				-					except 1	for the filing fee
l	Charge any	•		dernavmente r	of fee(s)	_	dit any ove			•	
	Under 37 CF	FR 1.16	and 1.17				•				
	/ARNING: Information on this			ic. Credit card i	nformation	should not b	e include	d on this	s form. Prov	ride cred	lit card
-	EE CALCULATION	JII P 1 U-20	036.								
Ě											
1.	. BASIC FILING, SEAR	RCH, AN FILING			ARCH F	FFS	F	YAMIN	NATION F	FFS	
	l	LILING	Small Enti			Small Entit		A Alvino	Small Er		
	Application Type	Fee (\$)			<u>e(\$)</u>	Fee(\$)		ee(\$)	Fee(\$		Fees Paid (\$)
	Utility	300	150	50	0	250	20	00	100		
	Design	200	100	10	0	50	13	30	65		
	Plant	200	100	30	0	150		50	80		
	Reissue	300	150	50	0	250	60	00	300		
	Provisional	200	100	1	0	0		0	0		
2	. EXCESS CLAIM FEE	S								2	Small Entity
	Fee Description								<u>Fee</u>		<u>Fee (\$)</u>
	Each claim over 20 (inclu								50		25
	Each independent claim of		ncluding Reis	sues)					200 360		100 180
	Multiple dependent claim Total Claims		Claims	Fee(\$)	Fee I	Paid (\$)					ependent Clai
	-20 or HP=	2	X	25 =	50	<u> </u>				ee (\$)	Fee Paid
	HP = highest number of tot	_							-		·
	Indep. Claims		Claims	Fee(\$)	Fee	Paid (\$)					
,		1	<u> </u>	100 =	= 100						
1	- 3 OF HP=										
	- 3 or HP= HP = highest number of inc	<u> </u>	t claims paid for								
3	HP = highest number of inc	dependen	t claims paid for								
	HP = highest number of inc. APPLICATION SIZE F If the specification and dra	dependen EE wings ex	xceed 100 she	r, if greater than seets of paper (e	3. excluding	electronical	ly filed se	equence	e or compu	ter	
	HP = highest number of inc. APPLICATION SIZE F If the specification and dra listings under 37 C	dependen EE wings ex CFR 1.52	xceed 100 she 2(e)), the appli	r, if greater than seets of paper (elication size fee	excluding due is \$2	electronical 250 (\$125 fo	ly filed so or small e	equence	e or compu	ter litional	50
	HP = highest number of inc. APPLICATION SIZE F If the specification and dra listings under 37 C sheets or fraction the	dependententententententententententententente	xceed 100 she (e)), the appli See 35 U.S.C.	eets of paper (cication size fee	excluding due is \$2 and 37 CF	electronical 250 (\$125 fo R 1.16(s).	or small e	ntity) fo	or each add	litional	
	HP = highest number of inc APPLICATION SIZE F If the specification and dra listings under 37 C sheets or fraction t Total Sheets	dependentes EEE Twings ex CFR 1.52 Thereof. S Extra S	xceed 100 she 2(e)), the appli See 35 U.S.C. Sheets N	r, if greater than a cets of paper (e ication size fee 41(a)(1)(G) a umber of ea	excluding e due is \$2 nd 37 CF ch addit	electronical 250 (\$125 fo R 1.16(s). ional 50 o	or small en	ntity) fo n ther e	or each add	litional	50 Fee Paid (\$)
	HP = highest number of ind APPLICATION SIZE F If the specification and dra listings under 37 C sheets or fraction the total Sheets - 100 =	dependentes EEE Twings ex CFR 1.52 Thereof. S Extra S	xceed 100 she (e)), the appli See 35 U.S.C.	r, if greater than seets of paper (elication size feet 41(a)(1)(G) a umber of ea	excluding e due is \$2 nd 37 CF ch addit	electronical 250 (\$125 fo R 1.16(s).	or small en	ntity) fo n ther e	or each add	litional :	Fee Paid (\$) =
	HP = highest number of inc. APPLICATION SIZE F If the specification and dra listings under 37 C sheets or fraction to	dependen FEE wings ex CFR 1.52 chereof. S Extra S	xceed 100 she 2(e)), the appli See 35 U.S.C. 3heets <u>N</u> / 50 =	r, if greater than seets of paper (elication size fee 41(a)(1)(G) a umber of ea (ro	excluding due is \$3 nd 37 CF ch addit und up t	electronical 250 (\$125 fo R 1.16(s). ional 50 o	or small en	ntity) fo n ther e	or each add	litional :	
	HP = highest number of inc. APPLICATION SIZE F If the specification and dra listings under 37 C sheets or fraction to the sheets of the shee	dependent FEE twings ex CFR 1.52 thereof. S Extra S	xceed 100 she (e)), the appli See 35 U.S.C. (heets <u>N</u> / 50 =	r, if greater than seets of paper (elication size fee 41(a)(1)(G) a umber of ea (ro	excluding due is \$3 nd 37 CF ch addit und up t	electronical 250 (\$125 fo R 1.16(s). ional 50 o	or small en	ntity) fo n ther e	or each add	litional :	Fee Paid (\$) =
	HP = highest number of inc. APPLICATION SIZE F If the specification and dra listings under 37 C sheets or fraction to	dependent FEE twings ex CFR 1.52 thereof. S Extra S	xceed 100 she (e)), the appli See 35 U.S.C. (heets <u>N</u> / 50 =	r, if greater than seets of paper (elication size fee 41(a)(1)(G) a umber of ea (ro	excluding due is \$3 nd 37 CF ch addit und up t	electronical 250 (\$125 fo R 1.16(s). ional 50 o	or small en	ntity) fo n ther e	or each add	litional :	Fee Paid (\$) =
4	HP = highest number of inc. APPLICATION SIZE F If the specification and dra listings under 37 C sheets or fraction the Total Sheets - 100 = OTHER FEE(S) Non-English Specion of the feege, late fill	dependent FEE twings ex CFR 1.52 thereof. S Extra S	xceed 100 she (e)), the appli See 35 U.S.C. (heets <u>N</u> / 50 =	r, if greater than seets of paper (elication size fee 41(a)(1)(G) a umber of ea (ro	excluding due is \$3 nd 37 CF ch addit und up t	electronical 250 (\$125 fo R 1.16(s). ional 50 o	or small en	ntity) fo n ther e	or each add	litional :	Fee Paid (\$) =
4	HP = highest number of inc. APPLICATION SIZE F If the specification and dra listings under 37 C sheets or fraction to the sheets of the shee	dependent FEE twings ex CFR 1.52 thereof. S Extra S	xceed 100 she (e)), the appli See 35 U.S.C. (heets <u>N</u> / 50 =	r, if greater than seets of paper (elication size fee 41(a)(1)(G) a umber of ea (ro	excluding e due is \$ nd 37 CF ch addit und up t	electronical 250 (\$125 fo R 1.16(s). ional 50 o	or small en	ntity) fo n ther e	or each add	litional :	Fee Paid (\$) = Fees Paid (\$)
4	HP = highest number of inc. APPLICATION SIZE F If the specification and dra listings under 37 C sheets or fraction the Total Sheets - 100 = OTHER FEE(S) Non-English Specion of the feege, late fill	dependent FEE twings ex CFR 1.52 thereof. S Extra S	xceed 100 she (e)), the appli See 35 U.S.C. (heets <u>N</u> / 50 =	r, if greater than seets of paper (elication size fee 41(a)(1)(G) a umber of ea (ro	excluding e due is \$2 nd 37 CF ch addit und up t discount)	electronical 250 (\$125 fo R 1.16(s). ional 50 or o a whole r	or small en	ntity) for there	or each add	litional :	Fee Paid (\$) =

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Please find below and/or attached an Office communication concerning this application or proceeding.

09/16/2005 SDENBOB1 00000034 10743131

01 FC:2201 02 FC:2202 100.00 OP 50.00 OP

SEP 0 2 2005





UNITED STATES DEPARTMENT OF COMMERCE Patent and Trademark Office

		TO WOEN BENDE	PATES OF A	Address : CC	OMMIS: ashing	SIONER OF PATE ton, D.C. 20231	NTS AND TRADEMARKS
s	ERIAL NUMBER	FICING DATE	FI	RST NAMED APPLI	CANT		ATTORNEY DOCKET NO.
10	1749131						
-					1		
				-	7	E	XAMINER
	•						
				•		ART UNIT	PAPER NUMBER
					Į	DATE MAILED:	
		•	•	•			
	INFO	RMALITY RE PAY	MENT OF FEE				
The i	nformality regai 8-12-0ビ	rding the payment	of the fee in co	onnection with	the	e original filing	fee the amendment
A. FE	EDUE						
١. 🗀	The amendmen are insufficie	nt is considered in nt to cover the ent	complete in that ire fee due. The	the funds in Dep balance is due v	osit A within	ccount No the period set b	elow.
2.	cover the cla	nt is considered ar ims as shown in th iod set below.	n incomplete resp he attached Pater	onse, in that pay nt Application Fe	ment o	of \$ermination Reco	is insufficient to ord. Remittance is due
3. 🗷	recounty are	nt has not been e fee as indicated is due within the p	on the attached i	plicant has fail Patent Application	ed to on Fee	remit (or author e Determination	ize charge to a Deposit Record. Remittance or
4.	The filing fee	of \$	submit	ted in this applic	cation	is insufficient.	·
	A balance of \$.	is due for ac	ditional claims			•
_ /		:		·			
5. 🖂							
		·	•				
	OR OR	ICANT IS GIVEN NE (I) MONTH FR N WHICH TO REM	OM THE DATE O	F THIS LETTE	R. WHI	ICHEVER IS LO	PONSE, ONGER,
B. EX	CESS PAYMENT	*					
5.	It is noted that the application	t payment of \$	is in d Patent Applicat	excess of the a	mount nation	necessary to co	ver the claims now in
							for his consideration.

PTOL-319 (REV. 3-82)